



County of San Bernardino

F A S

STANDARD CONTRACT

FOR COUNTY USE ONLY

DO NOT ENCUMBER

<input type="checkbox"/> New	Vendor Code		<input type="checkbox"/> Dept.	<input type="checkbox"/> A	Contract Number			
<input checked="" type="checkbox"/> Change			SC		02-475 A1			
<input type="checkbox"/> Cancel								
County Department			Dept.	Orgn.	Contractor's License No.			
Department of Children's Services								
County Department Contract Representative			Telephone		Total Contract Amount			
Panda Harris			(909) 388-0320		\$150,000			
Contract Type								
<input type="checkbox"/> Revenue <input type="checkbox"/> Encumbered <input checked="" type="checkbox"/> Unencumbered <input type="checkbox"/> Other:								
If not encumbered or revenue contract type, provide reason: <u>Fee for Service Contract</u>								
Commodity Code		Contract Start Date	Contract End Date	Original Amount	Amendment Amount			
		06/05/02	06/04/04	\$75,000	\$75,000			
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount		
CWS	DPA	DPA	300	3205	PSE146D4	\$150,000		
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount		
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount		
Project Name			Estimated Payment Total by Fiscal Year					
Therapeutic Treatment Services			FY	Amount	I/D	FY	Amount	I/D
			2001/02	\$18,750		2003/04	\$68,750	I
			2002/03	\$56,250				
Contract type - 1			2002/03	\$ 6,250	I			

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, Department of Children's Services, hereinafter called the County, and

Name

Brenda Warren, LCSW

hereinafter called Contractor

Address

16279 Walnut Street

Hesperia, CA 92345

Phone

Birth Date

(760) 947-0070

Federal ID No. or Social Security No.

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1

It is hereby agreed to amend contract #02-475, as follows:

Section 1. Definitions

Page 3 of 15, add Paragraph L, as follows:

- L. Routine Reports - Quarterly Progress Reports provided to Social Worker that shall be appropriate for inclusion in the report to the court.

Section II. Contractor Therapeutic Treatment Service Responsibilities

Amend Paragraph B, number 2, page 4 of 15, to read as follows:

2. Perform psychological evaluations and assessments
 - Psychological evaluations and assessments must be conducted by a licensed psychologist or psychiatrist and shall not exceed an eight-hour maximum, including testing, evaluation and report writing.

Amend Paragraphs G and H, page 5 of 15, to read as follows:

- G. As specified by the DSC social worker the Contractor shall provide a variety of verbal and/or routine typewritten reports and recommendations based on psychological tests, psychological evaluations and counseling sessions, bonding and attachment and/or other assessments with the client. The Contractor will provide such information to County social workers and juvenile court, within three (3) working days from the date the services was performed. These types of reports shall be accomplished without additional charge to the County.
- H. Contractor may be required to provide specialized and/or lengthy typewritten reports (four+ pages) to County social workers and Juvenile Court. These reports will provide summary and detail information from the tests, evaluations, counseling sessions and bonding and/or other assessments and must be provided within two (2) weeks from the date the service was performed. Contractor will be reimbursed at the rate specified in Attachment A for these types of reports.

Section III. Contractor General Responsibilities

Replace Paragraph N, page 9 of 15, as follows:

- N. Contractor shall adhere to BBS and BOP rules regarding supervision of professional services provided by interns and associates.

Section V. Fiscal Provisions

Add Paragraph E, page 11 of 15, as follows:

- E. Contractor invoices shall identify services rendered by licensed interns or associates and invoiced amounts shall reflect approved rate, if applicable, per Attachment A.

Section VIII. Term

Amend Section VIII, page 13 of 15, to read as follows:

This contract is effective as of June 5, 2002 and is extended from its original expiration date of June 5, 2003, to expire on June 4, 2004 but may be terminated earlier in accordance with provisions of Section IX of the Contract.

Section X. General Provisions

Add the following to Section X, Paragraph A, Page 14 of 15:

County (***Insurance Information Only***):

County of San Bernardino
c/o Insurance Data Services
P. O. Box 12010-CB
Hemet, CA 92546-8010

ATTACHMENT A - Fee Schedule for Therapeutic Treatment Services

Attachment A is replaced with the revised attachment.

All other terms and conditions remain in full force and effect.

COUNTY OF SAN BERNARDINO

►
Dennis Hansberger, Chairman, Board of Supervisors

Dated _____

SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD

Clerk of the Board of Supervisors
of the County of San Bernardino.

By _____
Deputy

Brenda Warren, LCSW

(Print or type name of corporation, company, contractor, etc.)

By ►

(Authorized signature - sign in blue ink)

Name Brenda Warren
(Print or type name of person signing contract)

Title Licensed Clinical Social Worker
(Print or Type)

Dated _____

Address 16279 Walnut Street
Hesperia, CA 92345

Approved as to Legal Form

►
Ruth Stringer, Chief Deputy County Counsel

Date _____

Reviewed by Contract Compliance

►
Lori Ciabattini, HSS Contract Administration

Date _____

Reviewed for Processing

►
Cathy Cimbalo, Director, DCS

Date _____

Auditor/Controller-Recorder Use Only

<input type="checkbox"/> Contract Database	<input type="checkbox"/> FAS
Input Date	Keyed By

ATTACHMENT A

Standard Max Fee Schedule for Therapeutic Treatment Services

Services	PH.D	LCSW/MFT	MFTI/ACSW
Individual Therapy	\$100/hr	\$85/hr	\$55/hr
Group Therapy	\$55/session/client Max 6 clients per session	\$55/session/client Max 6 clients per session	\$35/session/client Max 6 clients per session
Psychological Testing/Report	\$110/hr (4 hr max)	\$0.00	\$0.00
Psychological Evaluation/Report	\$110/hr (8 hr max)	\$0.00	\$0.00
Bonding/Attachment Assessments	\$120/hr (3 hr max)	\$75/hr (4 hr max)	\$0.00
Testifying-Court Services	\$100/hr	\$85/hr	\$0.00
Non-Routine Report Writing	\$100/hr	\$85/hr	\$0.00
Home Visits	\$100/hr	\$85/hr	\$55/hr
School Visits	\$0.00	\$85/hr	\$55/hr
Family/Couples Therapy	\$0.00	\$100/hr	\$55/hr